INITIAL LIST OF MANAGERS OR MANAGING MEMBE STATE BUSINESS LICENSE APPLICATION OF:		FILE NUMBER
NAME OF LIMITED LIABILITY COMPANY		
NAME OF LIMITED-LIABILITY COMPANY		
FOR THE FILING PERIOD OF TO		
**YOU MAY FILE THIS FORM ONLINE AT www.nvsos.gov*		
he entity's duly appointed registered agent in the State of Nevada upon whom process ca	n be served is:	
A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: www.r	ivsos.gov	
USE BLACK INK ONLY - DO NOT HIGHLIGHT	ABO	VE SPACE IS FOR OFFICE USE ONLY
Return one file stamped copy. (If filing not accompanied by order inst	ructions, file stamped copy will be sent to	registered agent.)
IMPORTANT: Read instructions before completing and returning this form.		and the Manufacture of the LLO
 Print or type names and addresses, either residence or business, for all manager or mathe form. FORM WILL BE RETURNED IF UNSIGNED. If there are additional managers or managing members, attach a list of them to this forn Initial list fee is \$125.00. A \$75.00 penalty must be added for failure to file this form by State business license fee is \$200.00. Effective 2/1/2010, \$100 must be added for failure 5. Make your check payable to the Secretary of State. Ordering Copies: If requested above, one file stamped copy will be returned at no add A copy fee of \$2.00 per page is required for each additional copy generated when or accompany your order. 	n. the last day of the first month following organiz re to file form by deadline. ditional charge. To receive a certified copy, enc	ation date. close an additional \$30.00 per certification
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson Cit 3. Form must be in the possession of the Secretary of State on or before the last day of the receipt date.) Forms received after due date will be returned for additional fees and per filing.	e first month following the initial registration dat	
INITIAL LIST FILING FEE: \$125.00 LATE PENALTY: \$75.00	BUSINESS LICENSE FEE: \$200.00	LATE PENALTY: \$100.00
Complete only if applicable	Sec	tion 7(2) Exemption Codes
Pursuant to NRS, this entity is exempt from the business license fee.	Exemption code: 002	- Governmental Entity - 501(c) Nonprofit Entity - Home-based Business
Month and year your State Business License expires:	20 005	- Motion Picture Company - NRS 680B.020 Insurance Co.
NAME	(DOCUMENT WILL BE REJECTED	IF TITLE NOT INDICATED)
	MANAGER N	MANAGING MEMBER
ADDRESS	CITY	STATE ZIP CODE
NAME	(DOCUMENT WILL BE REJECTED	IF TITLE NOT INDICATED)
	MANAGER N	MANAGING MEMBER
ADDRESS	CITY	STATE ZIP CODE
NAME	(DOCUMENT WILL BE REJECTED	IF TITLE NOT INDICATED)
		MANAGING MEMBER
ADDRESS	CITY	STATE ZIP CODE
	7	
NAME	(DOCUMENT WILL BE REJECTED	IF TITLE NOT INDICATED)
		•
ADDRESS	☐ MANAGER ☐ M CITY	MANAGING MEMBER STATE ZIP CODE
declare, to the best of my knowledge under penalty of perjury, that the above ment	ioned entity has complied with the provision	ns of sections 6 to 18 of AB 146 of
the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 2 nstrument for filing in the Office of the Secretary of State.		
	Title	Date
X		



ROSS MILLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684 5708

Instructions for Initial List, Registered Agent and State Business License Application

Website: www.nvsos.gov

ATTENTION: You may now file your initial or annual list online at www.nvsos.gov IMPORTANT: READ ALL INSTRUCTIONS CAREFULLY BEFORE COMPLETING FORM.

ATTENTION - Effective October 1, 2009, filing and payment of the State Business License will be processed by the Secretary of State's office. Entities that are required to file an initial or annual list of officers with the Secretary of State are now required to file for the State Business License at the time their list is due as part of the annual list filing, unless specifically exempt. The State Business License fee is \$200. Those holding a current State Business License may receive a proration credit for the unexpired portion of their current State Business License.

TYPE or PRINT the following information on the Initial List and Registered Agent Form:

- 1. The NAME and FILE NUMBER of the entity EXACTLY as it is registered with this office.
- 2. The FILING PERIOD is the month and year of filing TO the month and year 12 months from that date. Example: if the entity date was 1/12/99 the filing period would be 1/1999 to 1/2000.
- 3. The name and address of the REGISTERED AGENT and OTHER names and addresses as required on The list should be entered in the boxes provided on the form. Limited-Liability Companies MUST Indicate whether MANAGER or MANAGING MEMBER is being listed.
- 4. If qualified for the statutory exemption from the State Business License, enter the applicable code in the area provided. If you have a current State Business License, enter the expiration date in the area provided for proper proration of business license fees.
- 5. The SIGNATURE, including his/her title and date signed MUST be included in the areas provided at the bottom of the form.
- 6. Completed FORM, FEES and applicable PENALTIES must be returned to the Secretary of State. Pursuant to NRS 225.085, all Initial and Annual Lists must be in the care, custody and control of the Secretary of State by the close of the business on the due date. Lists received after the due date will be returned unfiled, and will require any associated fees and penalties as a result of being late. Trackable delivery methods such as Express Mail, Federal Express, UPS Overnight may be acceptable if the package was guaranteed to be delivered on or before the due date yet failed to be timely delivered.

The filing fee for an initial list is \$125.00, in addition to the State Business License. Nonprofit corporations and corporations sole are not required to maintain a State Business License or pay the additional fee. Nonprofit corporation initial lists are \$25.00.

ADDITIONAL FORMS may be obtained on our website at www.nvsos.gov or by calling 775-684-5708.

FILE STAMPED COPIES: To receive one file stamped copy, please mark the appropriate check box on the list. Additional copies require \$2.00 per page and appropriate order instructions.

CERTIFIED COPIES: To order a certified copy, enclose an additional \$30.00 and appropriate instructions. A copy fee of \$2.00 per page is required for each copy generated when ordering 2 or more certified copies.

EXPEDITE FEE: Filing may be expedited for an additional \$75.00 fee.

Filing may be submitted at the office of the Secretary of State or by mail at the following addresses:

MAIN OFFICE:

Regular and Expedited Filings

Secretary of State **Status Division** 202 North Carson Street Carson City NV 89701-4201 Phone: 775-684-5708

Fax: 775-684-7123

SATELLITE OFFICES: Expedited Filings Only

Secretary of State – Las Vegas **Commercial Recordings Division** 555 East Washington Ave, Suite 5200 Las Vegas NV 89101 Phone: 702-486-2880

Fax: 702-486-2888



ROSS MILLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684 5708

Website: www.nvsos.gov

Customer Order Instructions

SUBMIT THIS COMPLETED FORM WITH YOUR FILING

USE BLACK INK ONLY - DO NOT HIGHLIGHT

Proces Service Re	· ·	Regular	24-Hour Expedit	e (additional fee included)
Name of Entity:				Date:
Return to:				
Contact Name:			Phone:	
Return Delivery	(email or fax options de	o not receive a copy via	mail; must be ordered sep	parately)
Email to:			☐ Fax to:	
☐ Hold for Pick	Up ☐ Mail to Ad	dress Above	FedEx: Acct #	
Other: (explain	below)			
	n: (include items being o		vn)*	
stamped copy ordered	s office keeps the original d at the time of filing is at re (plus \$30.00 for each ce	no charge. Each addition	_{nal} Total Amou	nt:
Method of Paym			_	
Check/Money	/ Order ☐ eCheck	Credit Card (attach	checklist) Trust Ad	ccount:
Use balance	remaining in job #			



ROSS MILLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684 5708

Website: www.nvsos.gov

SUBMIT THIS COMPLETED FORM WITH YOUR FILING

1 or 2-Hour Expedite Customer Order Instructions

USE BLACK INK ONLY - DO NOT HIGHLIGHT

Process Service Red	· -	·Hour Expedite dditional \$500.00 fee incl		our Expedite itional \$1000.00 fee included)
Name of Entity:				Date:
Return to:				
Contact Name:			Phone:	
Return Delivery	7:			
☐ Email to:			☐ Fax to:	
☐ Hold for Pick	Up Mail to Add	dress Above 🔲 i	FedEx: Acct #	
Other: (explain	pelow)			
Order Descriptio	n: (include items being or	dered and fee breakdowr))*	
stamped copy ordered	s office keeps the original pd at the time of filing is at ne (plus \$30.00 for each ce	o charge. Each additiona	al Total Amo	unt:
Method of Paym	ent:			
Check/Money	Order 🗌 eCheck	Credit Card (attach cl	necklist) Trust A	Account:
Use balance	remaining in job #			



ROSS MILLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 Phone: (775) 684 5708

Website: www.nvsos.gov

24-hour, 2-hour and 1-hour Expedite Service Guidelines

IMPORTANT: To ensure expedited service, please mark "Expedite" in a conspicuous place at the top of the service request. Please indicate method of delivery.

24-HOUR EXPEDITE SERVICE

The Secretary of State offers a 24-hour expedite service on most filings processed by this office. If you choose to utilize this service, please enclose with your filing the additional expedite fee. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Check the 24-hour expedite box on your customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 24-hour expedited service, include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made. This office *does not* fax confirmation of a 24-hour expedite.

The fee for 24-hour handling ranges from \$25.00 to \$125.00. Please consult our fee schedules for the appropriate 24-hour expedite fee. If you require assistance, please contact this office.

Time Constraints: Each filing submitted receives same day filing date and may be picked up within 24-hours. Filings to be mailed the next business day if received by 2:00 pm of receipt date and no later than the 2nd business day if received after 2:00 pm. Expedite period begins when filing or service request is received in this office in fileable form.

2-HOUR EXPEDITE SERVICE

The Secretary of State offers a 2-hour expedite service on most filings processed by this office. If you choose to utilize the 2-hour expedite service, please enclose with your filing an additional \$500.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 2-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 2-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

1-HOUR EXPEDITE SERVICE

The Secretary of State offers a 1-hour expedite service on most filings processed by this office. If you choose to utilize the 1-hour expedite service, please enclose with your filing an additional \$1000.00 per filing and/or order. Please note that this expedite fee is in addition to the standard fee charged on each filing and/or order. Complete and submit the 1-hour customer order instruction form. If not using our order form, state clearly in your cover letter that you are requesting 1-hour expedited service and include your telephone number and return information. Attach the order form or cover sheet to the *top* of your filing and submit to this office. Each filing will be returned by U.S.P.S. regular mail unless other arrangements are made.

1-Hour and 2-Hour Time Constraints: Each filing submitted for either 1-hour or 2-hour expedite receives same day filing date and will be acknowledged by fax or e-mail within expedite service time. Failure to indicate method of acknowledgement (fax or e-mail) or to provide a correct fax number or e-mail address may prevent the Secretary of State from acknowledging the filing of such documents. Filings may be picked up within the expedite service period. Filings to be mailed will be mailed out no later than the next business day following receipt. Expedite period begins when filing or service request is received in this office in fileable form.

The Secretary of State reserves the right to extend the expedite period in times of extreme volume, staff shortages or equipment malfunction. These extensions are few and will rarely extend more than a few hours.



Authorized Signature

ROSS MILLER Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684 5708 Website: www.nvsos.gov

ePayment Checklist (For Counter, Fax and Mail Requests)

Service Type: Counter M	1ail Fax	USE BLACK INK ONLY - DO NOT HIGHLIGHT		
Order Processing Requested: Regular Processing 24	(Expedite Pro	cessing Requires Additional Fees) 2-HOUR Expedite 1-HOUR Expedite		
Payment by Electronic C	heck (account holder	r name and address required below)		
Account Type: Checking Routing Number:		echeck		
Savings <u>Account Number:</u>	Δm	ount of Electronic Check: USD \$		
Payment by Card (card holder name and billing address required below)				
Card Type: VISA	MasterCard	Discover American Express		
4-digit number four NOTICE : For security and verification	nd on the front right side of Ameri on purposes, all credit card lit card. Failure to include t	v CODE* e of VISA, MasterCard and Discover cards ican Express card. I payments must include the 3 or 4-digit CVV2 code this code will result in the rejection of your filing or service. Year Amount to Charge Card: USD\$		
Order Information (requir	red)	Amount to onarge oard.		
Entity Name/Order Reference	ə:			
	ccount			
Payment Authorization I authorize the Secretary of State to be account(s):	oill an amount not to excee	ed the following to be charged to the above listed		
X		Not to Exceed Amount: USD \$		